

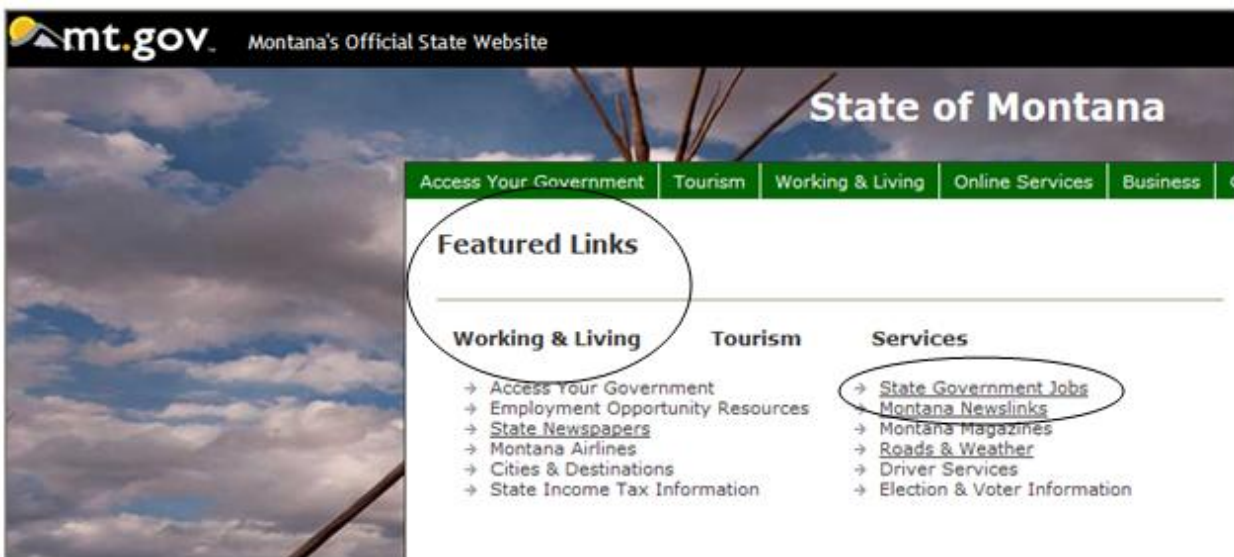
Create and Manage Your State Job Application

Learn how to:

- Create an ePass Account
- Create an application
- Claim an Employment Preference
- Edit or Remove an application
- Create a new version of you application

To begin, click on **State Government Jobs** under Featured Links Working & Living located here: <http://mt.gov/>. If you move your cursor over the Tourism or Services headings, the menu will change. Move your cursor back over the Working & Living heading to find the **State Government Jobs** link.

The page looks like this:



NOTE: Montana's Official State Website is <http://mt.gov/>. Under **Working & Living**, you will find a variety of information about working and living in Montana such as state newspapers, Montana cities and destinations, and State Government Jobs.

When you click on **State Government Jobs**, it takes you to the [State of Montana Employment Information](#) page.

For additional instructions, please review the written and video instructions on **How to Apply and Submit Your State Job Application** and **How to Find Job Listing**.

The page looks like this:



To create an application, click on **Create and manage your State Job Applications**. This will take you to the ePass login.

If you have already created an ePass account, you will click on **Login to this service using ePass**. It will take you to the login page.



The **Welcome to ePass Montana** page looks like this:

mt.gov
Montana's Official State Website

EPASS MONTANA

Access Your Government | Tourism | Working & Living | Online Services | Business | Government | Education | Home

Welcome to ePass Montana

Instructions | How Do I | Feedback

Existing Customer

Username: Password:

[Forgot your password?](#)

[Montana State Employees](#)

Login

New Customer

Create an ePass Montana account by selecting the button below:

Create an Account

Enter your **Username** and **Password** and click **Login**. To bring up any application(s) you have already created, **you must enter the same ePass Username and Password you created for the application.**

This will take you to the **State of Montana Employment Application Service** main menu.

The page looks like this:

State of Montana
Employment Application

INSTRUCTIONS | FEEDBACK

[Logout](#) | [ePass Home](#) | [Contact Us](#)

Welcome
to the State of Montana Employment Application Service

Select an option from the list below:

- ▶ [Apply for Job or Complete Un-submitted Application](#)
- ▶ [Add/Modify Employment Application\(s\)](#)
- ▶ [View Employment Application Submission History](#)
- ▶ [Search for a Job](#)

If you have forgotten your Password, click on the **Forgot your Password** link:

mt.gov
Montana's Official State Website

EPASS MONTANA

Access Your Government | Tourism | Working & Living | Online Services | Business | Government | Education | Home

Instructions | How Do I | Feedback

Welcome to ePass Montana

 **ePass Montana** is a convenient and secure way to use your state government services. State agencies may request your username, but will never request your password. Never share your password with anyone.

Existing Customer

Username:

Password:

[Forgot your password?](#)

[Montana State Employees](#)

Login

New Customer

Create an ePass Montana account by selecting the button below:

Create an Account

When you click on the **Forgot your Password**, you get the message below:

If you have forgotten your password, please enter your username below, and click on 'Submit'. The password hint you supplied when you created your ePass account will be sent to the email address or addresses you provided. If you are still unable to remember your password after receiving your password hint, you will need to create a new ePass account.

If you have forgotten your username, you will need to create a new ePass account.

Note: Your previously completed applications and other information cannot be retrieved without your Username.

The page looks like this:

mt.gov
Montana's Official State Website

EPASS MONTANA

Access Your Government | Tourism | Working & Living | Online Services | Business | Government | Education | Home

Forgot Password

If you have forgotten your password, please enter your username below, and select 'Submit'. The password hint you supplied when you created your ePass account will be sent to the email address or addresses you provided. If you are still unable to remember your password after receiving your password hint you will need to create a new ePass account.

If you have forgotten your username you will need to create a new ePass account as this information cannot be retrieved.

Enter your username:

Submit

Privacy & Security | Accessibility | Contact Us | Search

mt.gov
Montana's Official State Website

You will receive an email with the password hint. See email example below:

-----Original Message-----

From: epass@egovmt.com [mailto:epass@egovmt.com]

Sent: Tuesday, January 04, 2011 3:30 PM

To: Adamson, Denise

Subject: Hint for your password

Your password hint is:

XXXXXXX

If you are still unable to remember your password after receiving your password hint please follow the link below and set up new password:

<https://app.mt.gov/epass/epass/reset?ID=cMjChZkGfS2cn3EEN4TgqK4Ndq0NC6Sc>

The link is available for you until 04:30 PM, 01/04/11.

If you have forgotten your username you will need to create a new ePass account as this information cannot be retrieved.

To update your email address, click on **ePass Home** and **then Edit My Account**. This is important because this program sends password hints for forgotten passwords to the email address you provided in your account.

If this is the first time using the online employment system, you will click on **Create an ePass account**.



It will take you to **Create an ePass Account**.

The page looks like this:

mt.gov
MONTANA'S Official State Website

EPASS MONTANA

Access Your Government | Tourism | Working & Living | Online Services | Business | Government | Education | Home

Create an ePass Account [Instructions](#) [How Do I](#) [Feedback](#)

Personal Information

* Required field

*First Name:

*Last Name:

Contact Information

Daytime Phone: (555-555-5555)

Primary Email:

Alternate Email:

Login Information

*Username:

*Password:

*Verify Password:

*Password Hint:

About your username and password:

- username must be at least 6 characters long
- password must be at least 8 characters long
- password must use both letters and numbers
- password must be different than your username
- password is case sensitive

[Continue](#)

When creating an ePass account, it is very important to remember your **Username** and **Password**. Because this is a secure site for State Government's online services, your **Username** cannot be re-set. The instructions are in the lower right-hand corner.

When you first create an ePass account, **the 6-page employment application** appears automatically.

The page looks like this:

State of Montana

Employment Application

Apply Online

INSTRUCTIONS

FEEDBACK

[Logout](#) | [ePass Home](#) | [Contact Us](#)

Personal Data

Higher Education

Training Courses

Professional Licenses

Special Skills

Work Experience

Personal Data

[Preview your Application](#)
My First Application (7/11/2012 8:24 AM)

Complete the information below as you wish it to appear on your employment application.

Name and Address:

* Application Name: My First Application

* First Name: Linda

Middle Name: Susan

* Last Name: Davis

* Address 1: 777 S Somewhere

Address 2: PO Box Somewhere

* City: Helena

* State (Province): Montana

* Zip Code: 59601 (59620)

* Country: United States

Home Phone: 406-444-7777 (406-555-1234)

Work Phone: 406-444-7769 (406-555-1234)

Cell Phone: (406-555-1234)

* Email Address: someone@somewhere.net

Education:

High School Name: Somewhere

High School Address: Missoula, Montana

* Received Diploma:

☒ Yes
☐ No
☐ GED

* Required fields

Applicant Survey:

Please fill out the Survey below. It will be separated from your application and used only for statistical reports and other lawful purposes.

Title VII of the U.S. Civil Rights Act requires the State of Montana to "make and keep records relevant to the determinations of whether unlawful employment practices have been or are being committed." This is also a requirement of the Montana Human Rights Act and state and federal laws providing employment opportunities for veterans and persons with disabilities. The following survey helps to fulfill these requirements.

This information will be separated from your application. The survey information will be kept confidential, used only for computerized statistical reports and other lawful uses. Analysis of the information you and others provide will be used to monitor recruitment and selection practices in state government.

Notice the progress bar at the top progress bar as you move through the application pages. Once you have completed your first application, you may click on the progress bar to quickly go to any of the pages you want to review or edit.

The **Application Name** field will automatically display **My First Application**. You may change the title to whatever you want.

Personal Data

Higher Education

Training Courses

Professional Licenses

Special Skills

Work Experience

Personal Data

[Preview your Application](#)
My First Application (7/20/2011 7:42 AM)

Complete the information below as you wish it to appear on your employment application.

Name and Address:

* Application Name: My First Application

On the Personal Data page, the first section is **Name and Address**. The second section is **Education** for High School information.

The sections look like this:

Complete the information below as you wish it to appear on your employment application.

Name and Address:	
*Application Name:	<input type="text" value="My first application"/>
*First Name:	<input type="text" value="Linda"/>
Middle Name:	<input type="text" value="S"/>
*Last Name:	<input type="text" value="Davis"/>
*Address 1:	<input type="text" value="123 Garden Road"/>
Address 2:	<input type="text"/>
*City:	<input type="text" value="Helena"/>
*State (Province):	<input type="text" value="Montana"/>
*Zip Code:	<input type="text" value="59601"/> (59620)
*Country:	<input type="text" value="United States"/>
Home Phone:	<input type="text" value="406-444-7777"/> (406-555-1234)
Work Phone:	<input type="text" value="406-444-7777"/> (406-555-1234)
Cell Phone:	<input type="text"/> (406-555-1234)
*Email Address:	<input type="text" value="ldavis@mt.gov"/>

Education:	
High School Name:	<input type="text" value="Hardin High School"/>
High School Address:	<input type="text" value="Hardin, MT"/>
* Received Diploma:	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> GED

A red asterisk indicates a required field.

If you have this information in a Word document, such as in your resume or other application materials, you can copy and paste from the Word document into this application.

The next section is the **Applicant Survey**.

The section looks like this:

Applicant Survey:

Please fill out the Survey below. It will be separated from your application and used only for statistical reports and other lawful purposes.

Title VII of the U.S. Civil Rights Act requires the State of Montana to "make and keep records relevant to the determinations of whether unlawful employment practices have been or are being committed." This is also a requirement of the Montana Human Rights Act and state and federal laws providing employment opportunities for veterans and persons with disabilities. The following survey helps to fulfill these requirements.

This information will be separated from your application. The survey information will be kept confidential, used only for computerized statistical reports and other lawful uses. Analysis of the information you and others provide will be used to monitor recruitment and selection practices in state government.

Have you applied for a State government job before? ☒ Yes ☐ No

Are you a current or past State government employee? ☒ Yes ☐ No

☒ Female ☐ Male

RACE/ETHNIC IDENTIFICATION - PLEASE CHECK ALL THAT APPLY

Are you of Hispanic or Latino origin? ☐ Yes ☒ No (A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race.)

SELECT ONE OR MORE OF THE FOLLOWING RACIAL CATEGORIES:

☐ **American Indian or Alaska Native** (A person having origins in any of the original peoples of North or South America, including Central America, and who maintains tribal affiliations or community attachment.)

☐ **Asian** (A person having origin in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam.)

☐ **Black or African American** (A person having origins in any of the black racial groups of Africa.)

☐ **Native Hawaiian or other Pacific Islander** (A person having origins in the original peoples of Hawaii, Guam, Samoa, or other Pacific islands.)

☒ **White** (A person having origins in any of the original peoples of Europe, the Middle East, or North Africa.)

DISABILITY STATUS

☐ Person with a disability (non-veteran) ☐ Veteran with a disability

MILITARY STATUS - Please check the one box that best describes your military status.

☒ No Military ☐ Active Duty ☐ National Guard ☐ Reserve ☐ Retired Military

☐ Former Service (separated, not retired)

Vietnam Era Veteran? ☐ Yes ☒ No

We use the information you and others provide for statistical reports to monitor recruitment and selection practices in state government. We appreciate you providing this important information.

The next section is **Employment Preference**. If you want to claim either the Veterans' Public Employment Preference or the Persons with Disabilities Public Employment Preference, you will click **yes**. The preference information will open.

The **Employment Preference** section looks like this:

Employment Preference:

*Do you claim the Veterans' Public Employment Preference or the Persons with Disabilities Public Employment Preference? ☒ Yes ☐ No

Employment Preference allows applicants to claim a preference under the Veterans' Public Employment Preference Act or the Persons with Disabilities Public Employment Preference Act. Applying for a preference is voluntary. All information related to a preference will be kept confidential and used only during the hiring process. Applicants hired by the state will have this information placed in a separate confidential selection file.

Contact your local Job Service Workforce Center for details on veterans' preference. Contact your local Montana Vocational Rehabilitation Services Office, Department of Public Health and Human Services (DPHHS) for details on obtaining persons with disabilities preference certification.

☒ **A Veteran, if**
 You have been separated under honorable conditions, AND have served more than 180 consecutive days of active federal military duty other than for training in the Army, Air Force, Navy, Marines, or Coast Guard or were a member of the reserves who served on federal military duty during a period of war or in a campaign or expedition for which a campaign badge is authorized.
 You are or have been a member of the Montana Army or Air National Guard who has satisfactorily completed a minimum of 6 years service in armed forces, the last 3 of which have been served in the Montana Army or Air National Guard.

☐ **A Disabled Veteran, if**
 You have been separated under honorable conditions from military duty, AND
 You have an established Armed Forces service-connected disability OR are receiving compensation, disability retirement benefits, or pension from the U.S. Department of Veterans Affairs or military department, OR you have received a Purple Heart.

☐ **The spouse of a disabled veteran if the veteran's disability prevents him/her from working.**

☐ **The unremarried surviving spouse of a veteran or disabled veteran.**

☐ **The mother of a veteran, if**
 THE VETERAN died under honorable conditions while serving in the Armed Forces, OR THE VETERAN has a service-connected, permanent, and total disability, AND
 YOUR SPOUSE is totally and permanently disabled, OR YOU are the unremarried widow of the father of the veteran.

To claim Montana Persons with Disabilities Employment Preference you must be (select one of the items below):

☐ **A person with a disability certified by DPHHS, OR**

☐ **The spouse of a totally (100%) disabled person certified by DPHHS AND have resided continuously in Montana for at least 1 year immediately before applying for employment.**

Below, select the document which validates your eligibility for employment preference. Applicants claiming a preference must mail, fax, email or upload the selected document to the hiring agency no later than the closing date. The agency contact information is located in the job listing.

DD-214 showing the character of discharge

☐ Mail-in ☒ Upload

Browse...

File uploaded: Linda_Davis.doc, 4/2/2012

3:46:25 PM

DPHHS Disability Certification

☐ Mail-in ☐ Upload

Service-connected disability letter

☐ Mail-in ☐ Upload

A document issued by the Office of the Adjutant General of the Montana National Guard certifying service.

☐ Mail-in ☐ Upload

Upload File

Back

Menu

Save and Continue

After you click on the preference you want to claim, click on the document that validates your eligibility. You may select **Mail-in** or **Upload**.

If you have the document electronically, you may upload the file. Click Browse to locate the file then click on **Upload File** at the bottom of the page.

When the document is loaded, the File Uploaded message and the file name will appear beside the Browse button.

It will look like this:

Below, select the document which validates your eligibility for employment preference. Applicants claiming a preference must mail, fax, email or upload the selected document to the hiring agency no later than the closing date. The agency contact information is located in the job listing.

DD-214 showing the character of discharge
☐ Mail-in ☒ Upload File uploaded: Linda_Davis.doc, 4/2/2012 3:46:25 PM

DPHHS Disability Certification
☐ Mail-in ☐ Upload

Service-connected disability letter
☐ Mail-in ☐ Upload

A document issued by the Office of the Adjutant General of the Montana National Guard certifying service.
☐ Mail-in ☐ Upload

When you have completed the Personal Data page, click **Save and Continue** at the bottom of the page.

If you forget to complete a required field the page will not save and the cursor will appear in the field you forgot to enter. If you don't complete the field and click on **Save and Continue** again, you will get a message in red indicating the field (s) not completed. The message looks like this:

Complete the information below as you wish it to appear on your employment application.

Please complete all required fields.
Address 1

Name and Address:

*Application Name:

*First Name: Middle Name: *Last Name:

*Address 1:

Address 2:

*City: *State (Province): *Zip Code: (59620)

*Country:

Once you have completed the fields, click **Save and Continue** to go to the next page - **Higher Education**.

The page looks like this:

The screenshot shows the 'Higher Education' section of the 'State of Montana Employment Application'. At the top, there's a green header with the title and a navigation bar with links like 'INSTRUCTIONS', 'FEEDBACK', 'Logout', 'ePass Home', and 'Contact Us'. Below the header is a tabbed interface with 'Higher Education' selected. The main content area shows a list of 'Your entries so far include:' with three entries: 'Eastern Montana State College', 'National College of Business', and 'University of Montana'. Each entry has 'Edit' and 'Remove' links. Below this is a form titled 'Colleges, Universities and Degrees:'. The form contains several required fields marked with a red asterisk: 'School or Program Name', 'City', 'State' (a dropdown menu), 'Country' (a dropdown menu showing 'United States'), 'Degree/Level Attained' (a dropdown menu), and 'Completion Date' (two dropdown menus showing 'N/A'). There are also text input fields for 'Major(s)', 'Minor(s)', and 'Total Credits Earned'. At the bottom of the form, there are radio buttons for 'Semester Hours', 'Quarter Hours', and 'Other'. A green button labeled '+ Additional Education' is at the bottom right of the form. At the very bottom of the page, there are three buttons: 'Back', 'Menu', and 'Continue to Training Courses'.

State of Montana
Employment Application

INSTRUCTIONS | FEEDBACK

[Logout](#) | [ePass Home](#) | [Contact Us](#)

Personal Data | **Higher Education** | Training Courses | Professional Licenses | Special Skills | Work Experience

Higher Education

[Preview your Application](#)
My First Application (7/11/2012 8:24 AM)

Your entries so far include:

Eastern Montana State College	Edit	Remove
National College of Business	Edit	Remove
University of Montana	Edit	Remove

Colleges, Universities and Degrees:

* Required fields. (Note: Leave blank if only page does not apply.)

* School or Program Name:

* City:

* State:

* Country:

* Degree/Level Attained:

* Completion Date:

Major(s):

Minor(s):

Total Credits Earned:

System for Awarded Credits:

☐ Semester Hours

☐ Quarter Hours

☐ Other:

[+ Additional Education](#)

[Back](#) | [Menu](#) | [Continue to Training Courses](#)

If you want to enter information for higher education, enter information for all required fields marked with a red asterisk. You may leave this page blank if you do not want to enter higher education information.

You have several different options in the **Degree/Level Attained** field such as BA, Master, and Some College etc. Begin with the highest degree or level attained.

Colleges, Universities and Degrees:

*Required fields [Note: Leave blank if this page does not apply.]

*School or Program Name: Eastern Montana State College

*City: Billings

*State: Montana

*Country: United States

*Degree/Level Attained: Bachelors Degree

*Completion Date: June 1977

Major(s): Special Education

Minor(s):

Total Credits Earned: 40

System for Awarded Credits: ☐ Semester Hours ☒ Quarter Hours ☐ Other

[Save Higher Education](#)

[Back](#) [Menu](#) [Continue to Training Courses](#)

When you have completed the information, click **Save Higher Education**.

It saves under **Your entries so far include.**

The page looks like this:

Personal Data **Higher Education** Training Courses Professional Licenses Special Skills Work Experience

Higher Education

Your entries so far include:

Eastern Montana State College	Edit Remove
National College of Business	Edit Remove

Colleges, Universities and Degrees:

*Required fields [Note: Leave blank if this page does not apply.]

*School or Program Name:

*City:

*State: -- Select --

*Country: United States

*Degree/Level Attained: -- Select --

*Completion Date: -- N/A -- -- N/A --

Major(s):

Minor(s):

Total Credits Earned:

System for Awarded Credits: ☐ Semester Hours ☐ Quarter Hours ☐ Other

[Back](#) [Menu](#) [Continue to Training Courses](#) [+ Additional Education](#)

You may enter additional college information if applicable. Save and it will appear at the top. You may edit any of the information. When you preview your application, the most recent entry appears at the bottom.

When you have completed entering your education, click on the **Continue to Training Courses**.

The page looks like this:

Personal Data

Higher Education

Training Courses

Professional Licenses

Special Skills

Work Experience

Training Courses

[Preview your Application](#)
My First Application (7/11/2012 8:19 AM)

Your entries so far include:

Computers 101

Project Management

Edit

Remove

Edit

Remove

Training Courses:

* Required fields. [Note: Leave blank if this page does not apply.]

* Course Name:

Location:

(City/State/Country)

Dates Attended:

May

2012

to

May

2012

(Mo./yr.)

* Total Hours:

* Did you Complete the Course?

☐ Yes ☐ No

Description of Course:

(You have 3000 characters remaining for your description...)

+ Add Training Course

Back

Menu

Continue to Professional Licenses

Enter any training courses. You can put in a brief description of the course or you may copy and paste this from other Word documents.

It saves this information under **Your entries so far include:** just like the higher education page. These will appear in the order you entered them with the most recent entry at the bottom.

When you have completed the page, click on **Continue to Professional Licenses.**

The page looks like this:

Personal Data Higher Education Training Courses **Professional Licenses** Special Skills Work Experience

Professional Licenses

[Preview your Application](#)
My first application (6/19/2012 7:14 AM)

List Current Professional Licenses, registration, or certifications (engineering, medical, CPA, etc.)

Your entries so far include:
None Added

Professional Licenses, Registration, or Certifications:

* Required fields [Note: Leave blank if this page does not apply.]

* Licensing Agency Name:

Licensing Agency Location: (City/State/Country)

* Type of License/Certification:

Endorsement/Restriction: (if applicable)

Date Licensed: (mm/dd/yyyy)

License Expiration: (mm/dd/yyyy)

[+ Add Professional License](#)

[Back](#) [Menu](#) [Continue to Special Skills](#)

If you have any professional licenses, enter them on this page.

If you do not have any professional licenses, it will state: **Your entries so far include: None Added.**

You may continue to the next page. Click on **Continue to Special Skills**.

The page looks like this:

[Logout](#) | [ePass Home](#) | [Contact](#)

Personal Data Higher Education Training Courses Professional Licenses **Special Skills** Work Experience

Special Skills

[Preview your Application](#)
My first application (6/19/2012 7:14 AM)

List Special Skills such as word processing, operating a forklift, heavy equipment or computer programming. Include a list of equipment that you know how to use. May list skills from volunteer work like Habitat for Humanity or from professional organizations like Toastmasters. Leave blank if page does not apply.

Special Skills:

PERSONNEL MANAGEMENT:
Coordinated the development of the state of Montana's online employment application system. There is not another web project in State government that was developed in-house which rivals the scope and complexity of this service. Maintained overall responsibility for the State Equal Employment Opportunities (EEO) Program for over 20 years; developed and implemented a statewide EEO and Affirmative Action (AA)

163 character left

[Back](#) [Menu](#) [Save and Continue to Work Experience](#)

Enter special skills such as word processing, operating forklifts, heavy equipment, or computer programming.

Click on **Save and Continue to Work Experience**.

The page looks like this:

**State of Montana
Employment Application**

INSTRUCTIONS | FEEDBACK

LOGOUT | MY DATA | CONTACT US

Personal Data | Higher Education | Training Courses | Professional Licenses | Special Skills | **Work Experience**

Work Experience

[Preview your Application](#)
My First Application (7/19/2012 11:54 AM)

List your work and/or volunteer experience. Emphasize the experience you have that is relevant to the vacant position (refer to vacancy announcement). Begin with your present or most recent experience. Include military service that would help you qualify. List each promotion as a separate position. This information must be completed even if you submit a resume.

NOTE: Your network provider may time you out if you take too long entering your experience. You may want to type your experience in word-processing, then cut and paste into the experience page. The only formatting retained by this program is paragraphs, bullets, and numbering. All other formatting is removed.

Your entries so far include:

Department of Administration	Edit	Remove
Department of Administration	Edit	Remove
Central Feeds Company	Edit	Remove

Experience

* Required Fields (NOTE: Leave blank if this page does not apply.)

* Employee Name:

* Employee City/Town:

* Employee State/Country: Montana United States

* Your Job Title:

* Start Date:

* End Date:

* Average Hours per week:

* Time Employed: Years Months

* Type of Employment:

* Supervisor's name:

Supervisor's phone number: (408) 533-1234

* Describe your duties in detail:

6000 character left

* Reason for Leaving:

200 character left

[Add Work Experience](#)

[Back](#) [Next](#) [Save Application](#)

On the Work Experience page, please read the instructions and the NOTE.

List your work and/or volunteer experience. Emphasize the experience you have that is relevant to the vacant position (refer to vacancy announcement). Begin with your present or most recent experience. Include military service that would help you qualify. List each promotion as a separate position. **This information must be completed even if you submit a resume.**

NOTE: Your network provider may time you out if you take too long entering your experience. You may want to type your experience in word-processing, then cut and paste into the experience page. The only formatting retained by this program is paragraphs, bullets, and numbering. All other formatting is removed.

You have up to 6,000 characters in the **Describe your duties in detail section**. If you paste in more than 6,000, it will cut off part of the information, you will get a message that you have typed too many characters, and the text box turns red. Edit your description to no more than 6,000 characters.

*End Date: Present
 *Average Hours per week: 40
 *Time Employed: 25 Years 2 Months
 *Type of Employment: Full Time
 *Supervisor's name: Peggy Davis
 Supervisor's phone number: 406-444-3871 (406-555-1234)
 *Describe your duties in detail:
 Linda was the State EEO Program Coordinator for 20 years. Linda has worked in Human Resources Management for 32 years. This includes extensive work in prevention of discrimination and harassment and in recruitment and selection. For the past 10 years Linda has worked with the HR modules (Manage Position, Manage E

315 character left



It saves under **Your entries so far include:** It will put the entries in date order, starting with the most recent job.

After you an entered your work experience, you may want to preview your application. Click on **Preview your Application.**

This link is on each page of your application. It will open in a different window. **If your application does not open, make sure your pop-up blocker is turned off.**

Personal Data | Higher Education | Training Courses | Professional Licenses | Special Skills | **Work Experience**

Work Experience

[Preview your Application](#)
 My Application (6/8/2012 7:42 AM)

List your work and/or volunteer experience. Emphasize the experience you have that is relevant to the vacant position (refer to vacancy announcement). Begin with your present or most recent experience. Include military service that would help you qualify. List each promotion as a separate position. **This information must be completed even if you submit a resume.**

NOTE: Your network provider may time you out if you take too long entering your experience. You may want to type your experience in word-processing, then cut and paste into the experience page. The only formatting retained by this program is paragraphs, bullets, and numbering. All other formatting is removed.

Your entries so far include:
 Department of Administration [Edit](#) [Remove](#)
 Department of Administration [Edit](#) [Remove](#)
 Central Feeds Company [Edit](#) [Remove](#)

Your application looks like this:



STATE OF MONTANA EMPLOYMENT APPLICATION

AN EQUAL OPPORTUNITY EMPLOYER

1. Name: Davis, Linda Susan

MailingAddress: 777 S Somewhere PO Box Somewhere
Helena, Montana 59601

Work Phone: 406-444-7769 **Home Phone:** 406-444-7777 **Cell Phone:**

Email Address: someone@somewhere.net

2. What position are you applying for?

Department:

Division:

Position Title:

Position Numbers:

Location:

Listing Number:

Do you want to be informed before we contact your present employer? ☐ Yes ☐ No

3. Education - High School Somewhere

Missoula, Montana

Received Diploma or Equivalency Certificate? ☒ Yes ☐ No ☐ GED

8. The information you provide on this application is subject to verification. Falsifications or misrepresentations may disqualify you from consideration for employment with the State of Montana or, if hired, may be grounds for termination at a later date.

With my signature below, I certify that all information on this and all attached pages is true, correct and complete to the best of my knowledge and contains no willful falsifications or misrepresentations. I authorize all former employers to release job-related information they may have about me to the State of Montana or its agents and employees. I release all persons or companies from any liability or responsibility for providing such information.

SIGNATURE: Linda Davis

DATE SIGNED:

Section 2 is blank until you apply for a job listing. The section will automatically populate the position information when you apply. The **Date Signed** in section 8 will automatically display when you submit your application.

If there is any information you need to add or edit, save the application first. See the instructions below to edit your application.

When you have finished previewing your application, close the window. You will be at the **Work Experience** page.

Click **Save Application** at the bottom of the page.

*Start Date: [---] [---] [---]
 *End Date: Present [---] [---]
 *Average Hours per week: [---]
 *Time Employed: [---] Years [---] Months
 *Type of Employment: --Select--
 *Supervisor's name: [---]
 Supervisor's phone number: [---] (406-555-1234)
 *Describe your duties in detail: [---]
 6000 character left
 *Reason for Leaving: [---]
 200 character left
 [Back] [Menu] [Save Application] [Add Work Experience]

Congratulations, you have completed your application!

When you click **Save Application**, it will take you to page where you may apply for a job, add/modify your application or search for a job.

The page looks like the:

State of Montana
Employment Application
 INSTRUCTIONS FEEDBACK
 Log Out | ePass Home | Contact Us
 Thank you for filling out a State of Montana Employment Application. Your application has not been submitted.
 To continue choose from the options below.
 [▶] [Apply for Job or Complete Un-submitted Application](#)
 [▶] [Add/Modify Employment Applications](#)
 [▶] [Search for a Job](#)

For instructions on applying for a job listing, see **How to Apply and Submit Your Applications** at [State of Montana Employment Information](#) website.

If you click on **Add/Modify Employment Applications**, it will take you to the **Employment Application(s)** page. You may create, edit, or remove employment applications.

The page looks like this:

State of Montana Employment Application

[INSTRUCTIONS](#)[FEEDBACK](#)[Logout](#) | [ePass Home](#) | [Contact Us](#)

Employment Application(s)

[Employment Process Details](#)[Reasonable Accommodation and EEO](#)

You may have up to three versions of your employment application in order to emphasize different aspects of your experience.

Version Name:	Date/Time Created:	Last Modified:	Modify:
My Application	3/30/2010 11:41:48 AM	7/2/2012 1:06:17 PM	Edit Remove
Another Application	11/3/2010 1:38:47 PM	4/2/2012 3:46:39 PM	Edit Remove

[+ Create New Version](#)[Menu](#)

To edit an application, click on the **Edit** link.

You may use the progress bar at the top to go the page(s) you want to edit.

State of Montana Employment Application

[INSTRUCTIONS](#)[FEEDBACK](#)[Logout](#) | [ePass Home](#) | [Contact Us](#)

Personal Data

[Preview your Application](#)[My Application \(7/2/2012 1:06 PM\)](#)

Complete the information below as you wish it to appear on your employment application.

To create another application, click on the **Create New Version**. **NOTE:** You may have up to three versions of your employment applications.

State of Montana Employment Application

[INSTRUCTIONS](#)[FEEDBACK](#)[Logout](#) | [ePass Home](#) | [Contact Us](#)

Employment Application(s)

[Employment Process Details](#)[Reasonable Accommodation and EEO](#)

You may have up to three versions of your employment application in order to emphasize different aspects of your experience.

Version Name:	Date/Time Created:	Last Modified:	Modify:
My First Application	3/30/2010 11:41:48 AM	7/19/2012 11:54:54 AM	Edit Remove
Another Application	11/3/2010 1:38:47 PM	4/2/2012 3:46:39 PM	Edit Remove

[+ Create New Version](#)[Menu](#)

Choose a name for the new version and click **Save**.

Modify:

[Edit](#) | [Remove](#)

[Edit](#) | [Remove](#)

[+ Create New Version](#)

Create New Version

Choose a Name for this New Version:

Third application *

Save

Close

The name you enter appears in the **Application Name** field.

State of Montana

Employment Application

Apply Online

INSTRUCTIONS | FEEDBACK

[Logout](#) | [ePass Home](#) | [Contact Us](#)

Personal Data

Higher Education

Training Courses

Professional Licenses

Special Skills

Work Experience

Personal Data

[Preview your Application](#)
 Third application (7/19/2012 12:57 PM)

Complete the information below as you wish it to appear on your employment application.

Name and Address:

* Application Name: Third application

* First Name: Linda

Middle Name: Susan

* Last Name: Davis

* Address 1: 777 S Somewhere

Address 2: PO Box Somewhere

* City: Helena

* State (Province): Montana

* Zip Code: 59601 (59620)

* Country: United States

Home Phone: 406-444-7777 (406-555-1234)

Work Phone: 406-444-7769 (406-555-1234)

Cell Phone: (406-555-1234)

* Email Address: someone@somewhere.net

The **Personal Data** and **Higher Education** pages will carry forward. For all other pages you will need to add new information and create a separate application. Follow the same steps used to create your first application. You may use the progress bar to move through the process.

Thank you for considering employment with the State of Montana.

Contact Information

The State of Montana has a decentralized human resources system and each agency is responsible for its own recruitment and selection processes.

Therefore, to get help with the online employment application or for information concerning a specific job listing, contact the state agency human resources staff identified on the job listing.

The **State Government Recruitment Contacts** list also contains agency specific contact information.